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> **NPDES** FORM



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, DC 20460 NOTICE OF INTENT (NOI) FOR STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY UNDER THE NPDES MULTI-SECTOR GENERAL PERMIT

FORM Approved OMB No. 2040-0004

3510-6

Permit	Inform	ation
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Master Permit Number: MAR050000

NPDES ID: MAR053427

Eligibility Information

State/territory where your facility is discharging: MA

Does your facility discharge to federally recognized Indian Country lands? No

Are you a "Federal Operator" as defined in Appendix A (https://www.epa.gov/sites/production/files/2015-10/documents/msgp2015_appendixa.pdf)? No

Which type of form would you like to submit? Notice of Intent (NOI)

By indicating "Yes", I confirm that I understand that the MSGP only authorizes the allowable stormwater discharges in Part 1.1.2 and the allowable non-stormwater discharges listed in Part 1.1.3. Any discharges not expressly authorized in this permit cannot become authorized or shielded from liability under CWA section 402(k) by disclosure to EPA, state, or local authorities after issuance of this permit via any means, including the Notice of Intent (NOI) to be covered by the permit, the Stormwater Pollution Prevention Plan (SWPPP), during an inspection, etc. If any discharges requiring NPDES permit coverage other than the allowable stormwater and non-stormwater discharges listed in Parts 1.1.2 and 1.1.3 will be discharged, they must be covered under another NPDES permit.

Are you a new discharger or a new source as defined in Appendix A (https://www.epa.gov/sites/production/files/2015-10/documents/msgp2015_appendixa.pdf)? No

- Have stormwater discharges from your facility been covered previously under an NPDES permit? Yes
 - Most current NPDES ID (i.e., permit tracking number) if you had coverage under EPA's MSGP 2008 or the NPDES permit number if you had coverage under an EPA individual permit: MAR05DR53
- Are you discharging to any waters of the U.S. that are designated by the state or tribal authority under its antidegradation policy as a Tier 3 water (Outstanding National Resource water)? (See Appendix L (https://www.epa.gov/sites/production/files/2015-10/documents/msgp2015_appendixl.pdf))

Does your facility discharge to a federal CERCLA site listed in Appendix P (https://www.epa.gov/sites/production/files/2015-10/documents/msgp2015_appendixp.pdf)? No

Operator Information

Operator Information

Operator Name: PROLERIZED NEW ENGLAND COMPANY, LLC

Operator Mailing Address

Address Line 1: 69 Rover Street

Address Line 2: City: Everett ZIP/Postal Code: 02149 State: MA

County or Similar Division: Middlesex

Operator Point of Contact Information

First Name Middle Initial Last Name: Keri

Organization:

Title: Regional Environmental Manager

Phone: 7817067003 Ext.:

Email: kfitzpatrick@schn.com

NOI Preparer Information

First Name Middle Initial Last Name: Roger E Gosciminski

Organization: ESS Group, Inc.

Phone: 401-330-1232 Ext.:

Email: rgosciminski@essgroup.com

Facility Information

Facility Information

Facility Name: SCHNITZER NORTHEAST - ATTLEBORO

Facility Address

Address Line 1: 136 BACON STREET

Address Line 2: City: ATTLEBORO 11/1/21, 1:24 PM NeT Document

ZIP/Postal Code: 02703

County or Similar Division: Bristol

Latitude/Longitude for the Facility

Latitude/Longitude: 41.8971°N, 71.3741°W

Latitude/Longitude Data Source: Map Horizontal Reference Datum: NAD 83

What is the ownership type of the facility? Corporation

Estimated area of industrial activity at your facility exposed to stormwater (rounded to the nearest quarter acre): 10.25

Sector-Specific Information

Primary Sector: N1 Primary Subsector: N1

Primary SIC Code: 5093

Is your facility presently inactive and unstaffed? No

Discharge Information

By indicating "Yes" below, I confirm that I understand that the MSGP only authorizes the allowable stormwater discharges in Part 1.1.2 and the allowable non-stormwater discharges listed in Part 1.1.3. Any discharges not expressly authorized in this permit cannot become authorized or shielded from liability under CWA section 402(k) by disclosure to EPA, state, or local authorities after issuance of this permit via any means, including the Notice of Intent (NOI) to be covered by the permit, the Stormwater Pollution Prevention Plan (SWPPP), during an inspection, etc. If any discharges requiring NPDES permit coverage other than the allowable stormwater and non-stormwater discharges listed in Parts 1.1.2 and 1.1.3 will be discharged, they must be covered under another NPDES permit.

State: MA

Yes

Federal Effluent Limitation Guidelines

Identify the Effluent Limitation Guideline(s) that apply to your stormwater discharges.

There are no guidelines associated with the sector(s) selected in the Facility Information section above.

Are you requesting permit coverage for any stormwater discharges subject to effluent limitation guidelines? $\underline{\text{No}}$

Benchmark Monitoring

Are you subject to benchmark monitoring requirements for a hardness-dependent metal? $\underline{\text{Yes}}$

- → Does your facility discharge into any saltwater receiving waters? No
 - → What is the hardness of your receiving water(s)? 37.5

Other Discharge Information

Does your facility discharge into a Municipal Separate Sewer System (MS4)? No

Receiving Waters Information

List all of the stormwater outfalls from your facility.

Outfall MY6:

Applicable Sectors

Select the Sectors/Subsector(s) that apply to this outfall.

	Sector	Subsector
∀	N - SCRAP RECYCLING FACILITIES	N1 - Scrap Recycling and Waste Recycling Facilities except Source-Separated

Latitude/Longitude: 41.8993°N, 71.3755°W

 ${f ec{f arphi}}$ This outfall is Substantially Identical to an existing outfall.

➤ Substantially Identical to Outfall ID: MY1

Receiving Water

GNIS Name: Waterbody Name: Listed Water ID: n/a Blackstone River n/a n/a

Is this receiving water designated by the state or tribal authority under its antidegradation policy as a Tier 2 (or Tier 2.5) water (water quality exceeds levels necessary to support propagation of fish, shellfish, and wildlife and recreation in and on the water)?

No

Is the receiving water listed as impaired on the 303(d) list and in need of a TMDL? $\underline{\text{Yes}}$

Cause of Impairment Group	ŤĒ	Pollutant
ORGANIC ENRICHMENT/OXYGEN DEPLETION		Oxygen, dissolved percent saturation

Cause of Impairment Group	Pollutant
MERCURY	Mercury, total [as Hg]
PATHOGENS	Coliform, fecal general
METALS (OTHER THAN MERCURY)	Lead, total [as Pb]
POLYCHLORINATED BIPHENYLS (PCBS)	Polychlorinated biphenyls [PCBs]
METALS (OTHER THAN MERCURY)	Cadmium, total [as Cd]
NUTRIENTS	Phosphorus, total [as P]
PATHOGENS	Enterococci

Has a TMDL been completed for this receiving waterbody? $\underline{\text{No}}$

Outfall MY4:

Applicable Sectors

Select the Sectors/Subsector(s) that apply to this outfall.

	Sector	Subsector
	N - SCRAP RECYCLING FACILITIES	N1 - Scrap Recycling and Waste Recycling Facilities except Source-Separated

Latitude/Longitude: 41.8986°N, 71.3755°W

☑ This outfall is Substantially Identical to an existing outfall.

➤ Substantially Identical to Outfall ID: MY1

Receiving Water

GNIS Name: Waterbody Name: Listed Water ID:
n/a Blackstone River n/a

Is this receiving water designated by the state or tribal authority under its antidegradation policy as a Tier 2 (or Tier 2.5) water (water quality exceeds levels necessary to support propagation of fish, shellfish, and wildlife and recreation in and on the water)?

No

Is the receiving water listed as impaired on the 303(d) list and in need of a TMDL? $\underline{\mbox{Yes}}$

Cause of Impairment Group	Pollutant
ORGANIC ENRICHMENT/OXYGEN DEPLETION	Oxygen, dissolved percent saturation
MERCURY	Mercury, total [as Hg]
PATHOGENS	Coliform, fecal general
METALS (OTHER THAN MERCURY)	Lead, total [as Pb]
POLYCHLORINATED BIPHENYLS (PCBS)	Polychlorinated biphenyls [PCBs]
METALS (OTHER THAN MERCURY)	Cadmium, total [as Cd]
NUTRIENTS	Phosphorus, total [as P]
PATHOGENS	Enterococci

Has a TMDL been completed for this receiving waterbody? $\underline{\text{No}}$

Outfall MY7:

Applicable Sectors

Select the Sectors/Subsector(s) that apply to this outfall.

	Sector	Subsector
€	N - SCRAP RECYCLING FACILITIES	N1 - Scrap Recycling and Waste Recycling Facilities except Source-Separated

Latitude/Longitude: 41.8994°N, 71.3755°W

☑ This outfall is Substantially Identical to an existing outfall.

→ Substantially Identical to Outfall ID: MY1

Receiving Water

GNIS Name: Waterbody Name: Listed Water ID: n/a Blackstone River n/a n/a

Is this receiving water designated by the state or tribal authority under its antidegradation policy as a Tier 2 (or Tier 2.5) water (water quality exceeds levels necessary to support propagation of fish, shellfish, and wildlife and recreation in and on the water)?

No

Is the receiving water listed as impaired on the 303(d) list and in need of a TMDL? Yes

Cause of Impairment Group	Pollutant
ORGANIC ENRICHMENT/OXYGEN DEPLETION	Oxygen, dissolved percent saturation
MERCURY	Mercury, total [as Hg]
PATHOGENS	Coliform, fecal general
METALS (OTHER THAN MERCURY)	Lead, total [as Pb]
POLYCHLORINATED BIPHENYLS (PCBS)	Polychlorinated biphenyls [PCBs]
METALS (OTHER THAN MERCURY)	Cadmium, total [as Cd]
NUTRIENTS	Phosphorus, total [as P]
PATHOGENS	Enterococci

Has a TMDL been completed for this receiving waterbody? $\underline{\text{No}}$

Outfall LMY:

Applicable Sectors

Select the Sectors/Subsector(s) that apply to this outfall.

	Sector	Subsector
∀	N - SCRAP RECYCLING FACILITIES	N1 - Scrap Recycling and Waste Recycling Facilities except Source-Separated

Latitude/Longitude: 41.8973°N, 71.3367°W

☐ This outfall is *Substantially Identical* to an existing outfall.

Receiving Water

GNIS Name: Waterbody Name: Listed Water ID:
n/a Blackstone River n/a

Is this receiving water designated by the state or tribal authority under its antidegradation policy as a Tier 2 (or Tier 2.5) water (water quality exceeds levels necessary to support propagation of fish, shellfish, and wildlife and recreation in and on the water)?

No

Is the receiving water listed as impaired on the 303(d) list and in need of a TMDL? $\underline{\text{Yes}}$

Cause of Impairment Group	Pollutant
ORGANIC ENRICHMENT/OXYGEN DEPLETION	Oxygen, dissolved percent saturation
MERCURY	Mercury, total [as Hg]
PATHOGENS	Coliform, fecal general
METALS (OTHER THAN MERCURY)	Lead, total [as Pb]
POLYCHLORINATED BIPHENYLS (PCBS)	Polychlorinated biphenyls [PCBs]
METALS (OTHER THAN MERCURY)	Cadmium, total [as Cd]
NUTRIENTS	Phosphorus, total [as P]
PATHOGENS	Enterococci

Has a TMDL been completed for this receiving waterbody? $\underline{\text{No}}$

Outfall MY2:

Applicable Sectors

Select the Sectors/Subsector(s) that apply to this outfall.

	Sector	Subsector
€	N - SCRAP RECYCLING FACILITIES	N1 - Scrap Recycling and Waste Recycling Facilities except Source-Separated

Latitude/Longitude: 41.8985°N, 71.3753°W

 ${f ec{f ec v}}$ This outfall is Substantially Identical to an existing outfall.

➤ Substantially Identical to Outfall ID: MY1

Receiving Water

GNIS Name: Waterbody Name: Listed Water ID:
n/a Blackstone River n/a

Is this receiving water designated by the state or tribal authority under its antidegradation policy as a Tier 2 (or Tier 2.5) water (water quality exceeds levels necessary to support propagation of fish, shellfish, and wildlife and recreation in and on the water)?

No.

Is the receiving water listed as impaired on the 303(d) list and in need of a TMDL? $\underline{\text{Yes}}$

Cause of Impairment Group	Pollutant
ORGANIC ENRICHMENT/OXYGEN DEPLETION	Oxygen, dissolved percent saturation
MERCURY	Mercury, total [as Hg]
PATHOGENS	Coliform, fecal general
METALS (OTHER THAN MERCURY)	Lead, total [as Pb]
POLYCHLORINATED BIPHENYLS (PCBS)	Polychlorinated biphenyls [PCBs]
METALS (OTHER THAN MERCURY)	Cadmium, total [as Cd]
NUTRIENTS	Phosphorus, total [as P]
PATHOGENS	Enterococci

Has a TMDL been completed for this receiving waterbody? $\underline{\text{No}}$

Outfall MY3:

Applicable Sectors

Select the Sectors/Subsector(s) that apply to this outfall.

	Sector	Subsector
☑	N - SCRAP RECYCLING FACILITIES	N1 - Scrap Recycling and Waste Recycling Facilities except Source-Separated

Latitude/Longitude: 41.8986°N, 71.3755°W

☑ This outfall is Substantially Identical to an existing outfall.

→ Substantially Identical to Outfall ID: MY1

Receiving Water

GNIS Name: Waterbody Name: Listed Water ID:
n/a Blackstone River n/a

Is this receiving water designated by the state or tribal authority under its antidegradation policy as a Tier 2 (or Tier 2.5) water (water quality exceeds levels necessary to support propagation of fish, shellfish, and wildlife and recreation in and on the water)?

No

Is the receiving water listed as impaired on the 303(d) list and in need of a TMDL? $\underline{\text{Yes}}$

Cause of Impairment Group ↓ L	Pollutant
ORGANIC ENRICHMENT/OXYGEN DEPLETION	Oxygen, dissolved percent saturation
MERCURY	Mercury, total [as Hg]
PATHOGENS	Coliform, fecal general
METALS (OTHER THAN MERCURY)	Lead, total [as Pb]
POLYCHLORINATED BIPHENYLS (PCBS)	Polychlorinated biphenyls [PCBs]
METALS (OTHER THAN MERCURY)	Cadmium, total [as Cd]
NUTRIENTS	Phosphorus, total [as P]
PATHOGENS	Enterococci

Has a TMDL been completed for this receiving waterbody? $\underline{\text{No}}$

Outfall MY5:

Applicable Sectors

Select the Sectors/Subsector(s) that apply to this outfall.

	Sector	Subsector
€	N - SCRAP RECYCLING FACILITIES	N1 - Scrap Recycling and Waste Recycling Facilities except Source-Separated

Latitude/Longitude: 41.8991°N, 71.3756°W

▼ This outfall is Substantially Identical to an existing outfall.

→ Substantially Identical to Outfall ID: MY1

Receiving Water

GNIS Name: Waterbody Name: Listed Water ID:
n/a Blackstone River n/a

Is this receiving water designated by the state or tribal authority under its antidegradation policy as a Tier 2 (or Tier 2.5) water (water quality exceeds levels necessary to support propagation of fish, shellfish, and wildlife and recreation in and on the water)?

and wildlife and recreation in and on the water)?

No

Is the receiving water listed as impaired on the 303(d) list and in need of a TMDL? Yes

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Cause of Impairment Group	Pollutant
ORGANIC ENRICHMENT/OXYGEN DEPLETION	Oxygen, dissolved percent saturation
MERCURY	Mercury, total [as Hg]
PATHOGENS	Coliform, fecal general
METALS (OTHER THAN MERCURY)	Lead, total [as Pb]
POLYCHLORINATED BIPHENYLS (PCBS)	Polychlorinated biphenyls [PCBs]
METALS (OTHER THAN MERCURY)	Cadmium, total [as Cd]
NUTRIENTS	Phosphorus, total [as P]
PATHOGENS	Enterococci

Has a TMDL been completed for this receiving waterbody? $\underline{\text{No}}$

Outfall MY1:

Applicable Sectors

Select the Sectors/Subsector(s) that apply to this outfall.

	Sector	Subsector
€	N - SCRAP RECYCLING FACILITIES	N1 - Scrap Recycling and Waste Recycling Facilities except Source-Separated

Latitude/Longitude: 41.8985°N, 71.3753°W

☐ This outfall is *Substantially Identical* to an existing outfall.

Receiving Water

GNIS Name: Waterbody Name: Listed Water ID: n/a Blackstone River n/a n/a

Is this receiving water designated by the state or tribal authority under its antidegradation policy as a Tier 2 (or Tier 2.5) water (water quality exceeds levels necessary to support propagation of fish, shellfish, and wildlife and recreation in and on the water)?

No

Is the receiving water listed as impaired on the 303(d) list and in need of a TMDL? $\underline{\text{Yes}}$

Cause of Impairment Group	Pollutant
ORGANIC ENRICHMENT/OXYGEN DEPLETION	Oxygen, dissolved percent saturation
MERCURY	Mercury, total [as Hg]
PATHOGENS	Coliform, fecal general
METALS (OTHER THAN MERCURY)	Lead, total [as Pb]
POLYCHLORINATED BIPHENYLS (PCBS)	Polychlorinated biphenyls [PCBs]
METALS (OTHER THAN MERCURY)	Cadmium, total [as Cd]
NUTRIENTS	Phosphorus, total [as P]
PATHOGENS	Enterococci

Has a TMDL been completed for this receiving waterbody? $\underline{\text{No}}$

SWPPP Information

Has the SWPPP been prepared in advance of filing this NOI, as required? Yes

SWPPP Contact Information:

First Name Middle Initial Last Name: Keri Fitzpatrick

Organization:

Professional Title: Regional Environmental Manager

Phone: 7817067003 Ext.:

Email: kfitzpatrick@schn.com

SWPPP Availability:

Your current SWPPP or certain information from your SWPPP must be made available through one of the following two options. Select one of the options and provide the required information:

Note: you are not required to post any confidential business information (CBI) or restricted information (as defined in Appendix A (https://www.epa.gov/sites/production/files/2015-10/documents/msgp2015_appendixa.pdf)) (such information may be redacted), but you must clearly identify those portions of the SWPPP that are being withheld from public access.

☑ Option 1: Maintain a Current Copy of your SWPPP on an Internet Page (Universal Resource Locator or URL).

 $\textbf{SWPPP web address URL:} \quad \underline{\text{http://www.schnitzersteel.com/documents/epa/swppp-msgp-attleboro-ma.pdf}}$

 $\hfill \Box$ Option 2: Provide the following information from your SWPPP: 11/1/21, 1:24 PM NeT Document

Endangered Species Protection

Using the instructions in Appendix E (https://www.epa.gov/sites/production/files/2015-10/documents/msgp2015_appendixe-2.pdf) of the MSGP, under which endangered species criterion listed in Part 1.1.4.5 are you eligible for coverage under this permit?

Criterion C - Discharges and discharge related activities are not likely to adversely effect listed species and critical habitat

Provide a brief summary of the basis for the criterion selected in Appendix E (https://www.epa.gov/sites/production/files/2015-10/documents/msgp2015_appendixe-2.pdf):

NA

e.g. communication with U.S. Fish and Wildlife Service or National Marine Fisheries Service to determine no species in action area; Implementation of controls approved by EPA and the Services.

What federally-listed species or federally-designated critical habitat are located in your "action area"?

Northern long-eared Bat

Criterion C Eligibility Form:

I submitted my completed Criterion C Eligibility Form to EPA at least 30 days prior to submitting this NOI and have not been notified of any additional controls necessary to ensure no likely adverse affects on listed species and critical habitat.

Date your Criterion C Eligibility Form was sent to EPA: 07/29/2015

Note: After you submit your NOI and before your NOI is authorized EPA may notify you if any additional controls are necessary to ensure your discharges have no likely adverse affects on listed species and critical habitat.

Historic Preservation

If your facility is not located on Indian country lands, is your facility located on a property of religious or cultural significance to an Indian tribe? No

Using the instructions in Appendix F (https://www.epa.gov/sites/production/files/2015-10/documents/msgp2015_appendixf.pdf) of the MSGP, under which historic properties preservation criterion listed in Part 1.1.4.6 are you eligible for coverage under this permit?

Criterion A - No subsurface stormwater controls

Certification Information

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I have no personal knowledge that the information submitted is other than true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. Signing an electronic document on behalf of another person is subject to criminal, civil, administrative, or other lawful action.

Certified By: Keri A. Beck

Certifier Title: Mrs

Certifier Email: kfitzpatrick@schn.com

Certified On: 08/22/2019 11:32 AM ET